

## California and Western Medicine

Owned and Published by the  
CALIFORNIA MEDICAL ASSOCIATION  
Four Fifty Sutter, Room 2004, San Francisco, Phone DOuglas 0062

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**Advertisements.**—The Journal is published on the seventh of the month. Advertising copy must be received not later than the fifteenth of the month preceding issue. Advertising rates will be sent on request.

**BUSINESS MANAGER .** FREDERICK C. WARNSHUIS

Advertising Representative for Northern California  
L. J. FLYNN, 544 Market Street, San Francisco (DOuglas 0577)

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Subscription prices, \$5 (\$6 for foreign countries); single copies, 50 cents.

Volumes begin with the first of January and the first of July. Subscriptions may commence at any time.

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**Leaflet Regarding Rules of Publication.**—CALIFORNIA AND WESTERN MEDICINE has prepared a leaflet explaining its rules regarding publication. This leaflet gives suggestions on the preparation of manuscripts and of illustrations. It is suggested that contributors to this Journal write to its office requesting a copy of this leaflet.

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## EDITORIALS†

### CALIFORNIA MEETINGS OF A. M. A. AND C. M. A.

**Annual Session of the California Medical Association.**—The sixty-seventh annual session of the California Medical Association, held at the Hotel Huntington in Pasadena, May 9-12, has come and gone, and its events now take their place in the records of the past. The meetings began on Sunday and continued without interruption through Thursday noon. The scientific programs and exhibits, and all the social events of the occasion measured up to an excellent standard. The dinner to President Howard Morrow was made particularly enjoyable through entertainment supplied by the Alameda delegation, who brought with them several Oakland artists. The Woman's Auxiliary reported most gratifying meetings. The registration desks and commercial exhibits were housed in a specially arranged tent-like structure set up in a patio conveniently accessible. The general verdict, therefore, apparently of everyone who registered was that "a good time was had by all."

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**Dr. Howard Morrow Is Now the Past President, Dr. William W. Roblee Assumes the Presidency, and Dr. Charles A. Dukes Becomes President-Elect.**—At this time, the appreciation of the Association is expressed to Dr. Howard Morrow of San Francisco, the retiring president, for his efficient services during the past year.

The California Medical Association also greets the incoming president, Dr. William W. Roblee of Riverside, who takes up the responsibilities laid down by his predecessors. In his many years of service, Doctor Roblee has given of himself without stint and without thought of self. Hence, he may look forward to, and will receive the generous support of every Association member.

The newly elected President-elect is Dr. Charles A. Dukes of Oakland, and it is of interest that he was a classmate of Doctor Roblee at Stanford's Cooper Medical College, both being members of the Class of '95. Confrères throughout California are familiar with the valuable work Doctor Dukes has rendered as chairman of the California Cancer Commission and the Committee on Public Relations. His continued service in this new position will add to his laurels as an efficient administrator, and as a loyal, broad-visioned disciple in the guild of physicians.

So much for the nonce concerning this year's annual session. Full reports of the meetings of the House of Delegates will appear in the July issue of CALIFORNIA AND WESTERN MEDICINE.

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**American Medical Association Convenes in San Francisco June 13-17.**—We turn from the pleasant memories of a State Association gathering to look forward, with equal pleasure, to the

† Editorials on subjects of scientific and clinical interest, contributed by members of the California Medical Association, are printed in the Editorial Comment column which follows.

eighty-ninth annual session of the American Medical Association which will begin its five days of meetings in San Francisco on Monday, June 13. The *Journal of the American Medical Association*, in its issue of May 17, gives a comprehensive outline of the many activities in scientific and organized medicine which will then and there be considered. If you are not a subscriber of the *Journal A. M. A.*, it will be worth the while to borrow a copy from some colleague and orient yourself concerning the work of our national organization, in which the California Medical Association is one of the large constituent state units. And then, if you have in mind to go to San Francisco for the American Medical Association annual session, it would be wise to write the California Medical Association, Suite 2004, 450 Sutter Street, San Francisco, in regard to hotel reservations. The hotel rates were given on page 1573 of the *Journal A. M. A.* of May 7.

The many physicians who continue to attend meetings of the American Medical Association are unanimous in expressing a favorable opinion of their value. Inasmuch as the medical profession of California is this year's host, the registration of physicians from our state should be only such as to reflect the highest credit upon ourselves. In this connection, if you are not a "Fellow" of the American Medical Association, it would be well to write at once to the American Medical Association, 535 North Dearborn Street, Chicago, and make request for a fellowship application blank. As stated by Dr. Junius B. Harris, in his Salutation which appears in this number, the payment of the fellowship dues, of seven dollars, entitles each Fellow to a subscription to the *Journal A. M. A.*, while a subscription to the American Medical Association journal alone, and without the privileges of a fellowship, costs the same amount, namely, \$7.

The officers of the California Medical Association urge you to attend this eighty-ninth annual session of the American Medical Association (and so utilize in excellent way some of your vacation days); and also recommend that if you are a subscriber to the *Journal A. M. A.*, but not a "Fellow," to write and secure such fellowship, in order to be able to register and take part in the meetings. If you send your application to the California Medical Association, 450 Sutter Street, San Francisco, the communication will be referred to the proper A. M. A. officers. You will deny yourself real inspiration and pleasure if you fail to attend the June 13-17 session of the A. M. A. in San Francisco.

#### **"COUNTY INSTITUTIONS COMMISSIONS" FOR THE COUNTY HOSPITALS OF CALIFORNIA VERY MUCH NEEDED**

**How County Hospital Purposes Have Changed in Recent Years.**—During the last ten years, in many of the publicly supported county hospitals of California, the functions of those institutions, regarding the group of citizens who are there eligible for hospitalization and medical care

as well as financial and other factors having relation thereto, have undergone changes that are most important to patients, taxpayers, and the members of the medical profession. How far, for example, from almost generally accepted procedures in county hospital management some of these innovations can go, has been shown in recent issues of *CALIFORNIA AND WESTERN MEDICINE*, in the discussion of serious problems that have arisen at the Los Angeles County General Hospital.\*

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**Illegal and Injudicious Procedures in Vogue in Some County Hospitals of California.**—It is not necessary again to go into detailed discussion of some of the matters previously commented upon, it being sufficient to mention the following:

1. That public moneys seemingly have been expended in unwise and perhaps illegal adventures and efforts intended to collect money from indigent patients, when, according to California law, hospitalization and medical care supposedly should be given without cost to such needy citizens;

2. That the fundamental purpose for which county hospitals were brought into being still exists, namely, to place the facilities in such institutions only at the service of those citizens who, as sick and injured, lack the financial resources to pay for needed hospital and medical care;

3. When hospitalization costs are calculated and a fee table for such service is established by a board of supervisors, that the rates shall be fair and equitable, and not in excess of the costs of hospitalization service of equal or better standard, purchasable in private hospitals of the same community;

4. When statements for hospitalization services are rendered to "medically indigent" citizens (persons able to provide shelter, food and clothing for themselves and their dependents, but with insufficient funds to cover hospital and medical care costs), the law as interpreted by the California courts shall be observed, namely, that such "partly" or "medically indigent" persons shall be called upon to pay only so much of their hospitalization costs as would represent a fair and equitable proportion of their financial resources;

5. That a patient admitted to a county hospital should himself be informed (or through a legal guardian) within, say, three days after admittance, as to what the average costs per day and week would probably be (applying here the same routine that exists in private hospitals); and that thereafter, weekly if possible, or semimonthly or monthly, in any event, a memorandum of the approximate costs would be rendered (again, as in private hospitals), in order that the patient, if partly indigent, could ask for discharge, in case the costs were mounting to heights impossible for the individual to pay, in whole or in part;

6. That the routine plan of having patients, seriously ill or otherwise, sign over in blank, as it

\* See items on Los Angeles County Hospital in this issue, on page 477. Also previous articles in recent issues as follows: February, 1938, pp. 73 and 78; March, pp. 156 and 216; April, pp. 234 and 279; and May, pp. 309 and 383.